

material assistance for transfer to another EU country.<sup>4</sup>

• **Joining Health and Disability Insurance (Ziekte- en invaliditeitsverzekering (ZIV)):** asylum seekers who have still not received a decision from the CGVS after a procedure of 6 months, may apply for an employment permit C and if they work they may join the ZIV as an entitled party. Some asylum seekers can register with the ZIV based on a different capacity as a person with a disability or as a dependent if certain conditions are fulfilled.

### Content of medical care?

The Reception Act describes the right to medical care for the asylum seeker. They are entitled to the medical support required to be able to live their life in accordance with human dignity. The doctor must determine whether the medical care the asylum seeker needs fulfils this definition. Another condition is that the medical care is provided with an RIZIV-nomenclature code. There are a number of exceptions, listed in the appendix to the Royal Decree of 9 April 2007.

Comment: based on the Reception Act Fedasil provides all asylum seekers with the same medical care. However it is the case that the OCMW is reimbursed by the government in accordance with different guidelines than Fedasil. So the OCMW may have to decide whether it will pay for some medical care that an asylum seeker needs.

### Appeal procedure?

If the asylum seeker does not agree with a decision taken in relation to access to healthcare they may appeal against this decision. The procedure differs depending on whether the person had to contact OCMW or Fedasil (or a partner). An appeal may be submitted against the decision taken by the OCMW (or in the absence of a decision within a month), within 3 months to the employment court.

A letter against a decision taken by Fedasil with a doctor's opinion must initially be sent to the director general of Fedasil (or one of its partners),

who then has a month to decide. An appeal may also be submitted against a negative decision (or absence of a decision) within 3 months to the employment court.

### A few useful contacts

#### Fedasil Dispatching Service

For a place in a reception centre or information about code 207

WTC II, Antwerpsesteenweg 59B (waiting room on the ground floor to the right of the main entrance)  
1000 Brussels, 02/ 793.82.40

#### Fedasil, Medical Expenses Unit

[medic@fedasil.be](mailto:medic@fedasil.be); (fax) 02/ 213.44.12  
(tel.) 02/ 213.43.00 (NL) of 02/ 213.43.25 (FR)

The folders below are available in Dutch, French, English, Spanish, Russian, Portuguese, Mandarin,...  
You can download them for free from our website.

- Urgent Medical Assistance for people without legal residence status
- Pregnancy, childbirth & postnatal care for women without legal residence status
- Health insurance for people without legal residence or with precarious residence
- (short) Stay on medical grounds
- Mental healthcare for people without legal residence status
- A visa on medical grounds + cost bearing
- What to do in an industrial accident if you are not officially employed
- Medical support on voluntary return
- Access to healthcare for EU-citizens
- Medimmigrant – Presentation folder

## Medical care and asylum



### Information by email and by telephone

Telephone hours:

Mon: 10 a.m. – 1 p.m.

Tues: 2 p.m. – 6 p.m.

Fri: 10 a.m. – 1 p.m.

Tel. 02/274 14 33/34 ▪ Fax 02/274 14 48

E-mail: [info@medimmigrant.be](mailto:info@medimmigrant.be)

[www.medimmigrant.be](http://www.medimmigrant.be)

**( ! no appointments on site)**

Postal address:

Gaucheretstraat 164 ▪ 1030 Brussels

Fortis: 001-2389649-33



With the support of the  
Vlaamse Gemeenschapscommissie  
and the Gemeenschappelijke Gemeenschapscommissie



V.U.: vzw Medimmigrant,  
Gaucheretstraat 164, 1030 Brussels

<sup>4</sup> Judgment of the Court of Justice, 27.09.2012.

People seeking asylum in Belgium are entitled to medical support during the asylum procedure. The procedure to enjoy this medical support may vary in relation to the route the asylum seeker takes and their administrative situation. If the asylum seeker does not know what department he should contact, the code 207 in the Waiting register (if the code is active)<sup>1</sup> can provide this information. In principle this code gives the 'obligatory place of registration' allocated to the asylum seeker.

---

## Access to healthcare

---

### The asylum seeker is staying in a collective reception centre (code 207 = the detention centre)

---

This asylum seeker may attend a consultation with the doctor at the centre. This doctor may make a referral to other doctors or medical services. An asylum seeker may also consult another doctor at their own initiative but in that case they must pay the fees themselves.

### The asylum seeker is staying in a small scale reception initiative (code 207 = the reception initiative)

---

These are reception places organised by an OCMW (= local reception initiative) or by Vluchtelingenwerk Vlaanderen or CIRE (or their partners). Each partner has their own way of organising the reception. Some work with fixed doctors; others allow more freedom of choice of care provider. Some work with a medical card, others don't.

### The asylum seeker is not staying in a reception structure and has a code 207 'no-show' (or SPW code)

---

The medical expenses Unit at Fedasil (see below) is responsible for paying the medical expenses in the following categories of asylum seekers:

- Asylum seekers who did not take the offer of from the Fedasil Dispatching Service to be

---

<sup>1</sup> Comment: it is possible that another code 207 is visible but no longer active (e.g. processed asylum seekers).

designated a reception place. They do not want to stay in a centre or have left the reception place at their own initiative.

- The asylum seekers who submitted a second or subsequent asylum application and in relation to whom Fedasil decided not to designate a reception place.
- The asylum seekers were designated to a hotel/emergency reception centre (these structures are not considered traditional reception initiatives).

#### Operation of the medical expenses Unit

The person themselves, the care provider or third person with a written agreement (= requisitorium) request future medical care. If it is not possible to obtain such a payment undertaking in advance then the care provider may in principle still send the invoice to the Medical Expenses Unit but a 'certificate of urgent medical care' is required.

### The asylum seeker no longer has a code 207 (more)

---

There are asylum seekers who due to extraordinary circumstances are not designated a code 207 or for whom the code 207 is abolished (= removed). In principle this asylum seeker will be entitled to social service provision (including medical support) from the OCMW at their usual place of residence

### The asylum seeker is allocated to a return place in an open shelter centre (code 207 = the return place)

---

If the asylum seeker receives a decision of non-consideration from the CGVS or receives a negative decision at the end of the asylum procedure from the Raad voor Vreemdelingenbetwistingen (RVV), then the asylum seeker may be designated to a return place in one of the Fedasil reception centres. Reception and medical care will be offered there. If the asylum seeker does not go to the return place or leaves it, then the code 207 will 'usually' be 'no show'. In any event the Medical expenses Unit (see above) is responsible for the duration of the Order to Leave the Territory (BGV). Comment: Some processed

asylum seekers may stay in the original reception place under certain conditions (e.g. residents with medical problems and their family members, with proof).<sup>2</sup>

### The asylum seeker in a detention centre/prison

---

The asylum seeker is dependent on the care present in the detention centre/prison or the medical department which was referred to. The medical care will be paid for by the FOD interior affairs/justice and not by Fedasil or the POD Maatschappelijke Integratie. The asylum seeker may request to consult another doctor who may visit them in the detention centre/prison but then they must pay the costs themselves.

---

## End of the right to medical care

---

Once the BGV period has expired and the appeal period has lapsed, Fedasil shall no longer be authorised (unless the asylum-seeker can appeal to an extension of the reception centre).<sup>3</sup> If the asylum-seeker does not have any further legal residence status, then they may appeal to the Urgent Medical Assistance Procedure via the OCMW of the ordinary place of residence (see folder DMH).

If the asylum-seeker (or family member) becomes entitled to residence of more than 3 months, then they must leave the reception structure and have another entitlement enforced. In the case of admissible 9ter the asylum seeker may request authorisation from Fedasil to leave the reception centre.

---

## A few comments

---

- Appendix 26quater: if the DVZ takes a decision of non-consideration of the asylum application the asylum procedure is considered as de facto not 'started' in Belgium in accordance with the Dublin procedure but the person is, in principle entitled to

---

<sup>2</sup> Fedasil Instruction 23.09.2013 in relation to return path  
<sup>3</sup> Fedasil Instruction 15.10.2013 in relation to material aid.